| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| EASTERN DISTRICT OF MICHIGAN | | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|---|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Sandra First name | First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Tarnopol Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | 3 | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4579 | |

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) |
| | | EINs | EINs |
| 5. | Where you live | 10854 Ludlow | If Debtor 2 lives at a different address: |
| | | Number, Street, City, State & ZIP Code Oakland County | Number, Street, City, State & ZIP Code County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

| Deb | otor 1 Sandra F. Tarnopo | ol | | | Case number (if known) | |
|-----|---|----------------------------|--|--|---|---|
| | | | | | | |
| Par | Tell the Court About | our Bankruptcy | Case | | | |
| 7. | The chapter of the Bankruptcy Code you are | | | of each, see <i>Notice Required</i> f page 1 and check the approp | by 11 U.S.C. § 342(b) for Individuals Filing priate box. | g for Bankruptcy |
| | choosing to file under | Chapter 7 | | | | |
| | | ☐ Chapter 11 | | | | |
| | | ☐ Chapter 12 | | | | |
| | | ☐ Chapter 13 | | | | |
| 8. | How you will pay the fee | | | | heck with the clerk's office in your local co | |
| | | order. If yo | | | e yourself, you may pay with cash, cashier behalf, your attorney may pay with a credit | |
| | | | | tallments. If you choose this of the control of the | option, sign and attach the Application for I | Individuals to Pay |
| | | J | | , | ption only if you are filing for Chapter 7. By | law. a iudge mav. |
| | | but is not i applies to | equired to, waive your family size ar | your fee, and may do so only nd you are unable to pay the f | if your income is less than 150% of the office in installments). If you choose this optio | cial poverty line that n, you must fill out |
| | | tne <i>Applic</i> | ation to Have the C | Snapter / Filing Fee Walved (| Official Form 103B) and file it with your pet | ition. |
| 9. | Have you filed for | ■ No. | | | | |
| | bankruptcy within the last 8 years? | ☐ Yes. | | | | |
| | | Distri | ct | When | Case number | |
| | | Distri | ct | When | Case number | |
| | | Distri | ct | When | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | |
| | | Debte | or | | Relationship to you | |
| | | Distri | ct | When | Case number, if known | |
| | | Debte | or | | Relationship to you | |
| | | Distri | ct | When | Case number, if known | |
| 11. | Do you rent your | ■ No. Go | to line 12. | | | |
| | residence? | ☐ Yes. Has | your landlord obta | ained an eviction judgment ag | ainst you? | |
| | | _ 100. | No. Go to line | | | |
| | | | Yes. Fill out <i>In</i> this bankruptc | | ion Judgment Against You (Form 101A) ar | nd file it as part of |
| | | | | | | |

page 3

| Deb | otor 1 Sandra F. Tarnope | ol | | | Case number (if known) |
|-----|---|--------------------|--------------|--|--|
| | | | | | |
| Par | Report About Any Bu | sinesses | You Ow | n as a Sole Proprie | tor |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | e and location of bus | siness |
| | A sole proprietorship is a | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | e of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numl | oer, Street, City, Sta | te & ZIP Code |
| | it to this petition. | | Chec | k the appropriate bo | ox to describe your business: |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as d | lefined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | e |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | s. If you i | ndicate that you are flow statement, and f | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | ■ No. | I am | not filing under Char | oter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am Code | • | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am | filing under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have An | / Hazard | ous Property or An | y Property That Needs Immediate Attention |
| | Do you own or have any | ■ No. | , mazara | 240 1 10porty 01 741 | y . Topolly . That its sac minimum of the first sacration. |
| | property that poses or is | _ | | | |
| | alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is , why is it needed? | |
| | illinediate attention? | | 1100000 | my io it noodod. | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where i | s the property? | |
| | - | | | | Number, Street, City, State & Zip Code |
| | | | | | |
| | | | | | |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | otor 1 Sandra F. Tarnopo | ol | | Case number | (if known) |
|-----|---|---------------------|---|---|---|
| Par | t 6: Answer These Questi | ons for R | eporting Purposes | | |
| 16. | What kind of debts do you have? | 16a. | individual primarily for a perso | nsumer debts? Consumer debts are definional, family, or household purpose." | ed in 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | |
| | | | Yes. Go to line 17. | | |
| | | 16b. | | siness debts? Business debts are debts the through the operation of the busin | |
| | | | ☐ No. Go to line 16c. | | |
| | | | ☐ Yes. Go to line 17. | | |
| | | 16c. | State the type of debts you ov | ve that are not consumer debts or business | s debts |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7 | 7. Go to line 18. | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. Dare paid that funds will be ava | o you estimate that after any exempt prope illable to distribute to unsecured creditors? | erty is excluded and administrative expenses |
| | administrative expenses | | No | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | ☐ Yes | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | □ 25,001-50,000 |
| | you estimate that you owe? | ☐ 50-99 | | ☐ 5001-10,000 | ☐ 50,001-100,000 |
| | owe: | ☐ 100-1 ☐ 200-9 | | □ 10,001-25,000 | ☐ More than100,000 |
| 19. | How much do you estimate your assets to | □ \$0 - \$ | | □ \$1,000,001 - \$10 million | \$500,000,001 - \$1 billion |
| | be worth? | | 01 - \$100,000 | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion |
| | | | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion |
| 20. | How much do you estimate your liabilities | □ \$0 - \$ | | ☐ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion |
| | to be? | | 001 - \$100,000 | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion |
| | | | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion |
| Par | t7: Sign Below | | | | |
| For | you | I have ex | camined this petition, and I decl | are under penalty of perjury that the inform | ation provided is true and correct. |
| | | | | I am aware that I may proceed, if eligible, lief available under each chapter, and I cho | |
| | | | | ot pay or agree to pay someone who is not notice required by 11 U.S.C. § 342(b). | an attorney to help me fill out this |
| | | I request | relief in accordance with the ch | napter of title 11, United States Code, spec | ified in this petition. |
| | | bankrupt and 357 | cy case can result in fines up to | concealing property, or obtaining money or \$250,000, or imprisonment for up to 20 years. | property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | Sandra | dra F. Tarnopol F. Tarnopol e of Debtor 1 | Signature of Debtor | 2 |
| | | Executed | | Executed on | |
| | | | MM / DD / YYYY | MM | / DD / YYYY |

| Debtor 1 | Sandra F. Tarnopol | Case number (if known) | |
|----------|--------------------|------------------------|--|
| | | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| | II D. Schultz Attorney for Debtor | Date | March 18, 2019 MM / DD / YYYY |
|--------------------------|---------------------------------------|---------------|----------------------------------|
| Marshall D | . Schultz P38040 | | |
| Law Office | es of Marshall D. Schultz | | |
| 29777 Tele Southfield | egraph Road, Suite 2203 , MI 48034 | | |
| , , | City, State & ZIP Code | | marchalld ashulfs@amail.com |
| P38040 MI | 248-559-6930 | Email address | marshalld.schultz@gmail.com |
| Bar number & St | ate | | |

| Fill | in this information to identify you | ır case: | | | |
|---------------|---|---|--|------------|-----------------------------------|
| | tor 1 Sandra F. Tarno | ppol | | | |
| Deb | First Name | Middle Name | Last Name | | |
| 1 | use if, filing) First Name | Middle Name | Last Name | | |
| Uni | ed States Bankruptcy Court for the: | EASTERN DISTRICT | OF MICHIGAN | | |
| Cas (if kn | e number | | | | al Williams |
| (II KI | own) | | | _ | eck if this is an ended filing |
| | | | | | |
| Of | ficial Form 106Sum | | | | |
| | | | nd Certain Statistical Information | | 12/15 |
| info | mation. Fill out all of your sched original forms, you must fill out | ules first; then complete t | e are filing together, both are equally responsible for the information on this form. If you are filing amend the box at the top of this page. | | |
| ı aı | Julillianze Tour Assets | | | V | |
| | | | | | assets e of what you own |
| 1. | Schedule A/B: Property (Official | Form 106A/B) | | \$ | 295,000.00 |
| | | | | Ψ — | , |
| | | | | *_ | 3,748.00 |
| | 1c. Copy line 63, Total of all prope | rty on Schedule A/B | | \$ | 298,748.00 |
| Par | 2: Summarize Your Liabilities | | | | |
| | | | | | liabilities unt you owe |
| 2. | Schedule D: Creditors Who Have 2a. Copy the total you listed in Col | | y (Official Form 106D) the bottom of the last page of Part 1 of Schedule D | \$_ | 242,536.20 |
| 3. | Schedule E/F: Creditors Who Hav 3a. Copy the total claims from Pa | e <i>Unsecured Claims</i> (Officing 1) of the control of | al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i> | \$_ | 0.00 |
| | 3b. Copy the total claims from Pa | rt 2 (nonpriority unsecured | claims) from line 6j of Schedule E/F | \$_ | 39,859.73 |
| | | | Your total liabilities | \$ | 282,395.93 |
| Par | 3: Summarize Your Income ar | nd Expenses | | | |
| 4. | Schedule I: Your Income (Official I Copy your combined monthly inco | | e / | \$ | 2,983.98 |
| 5. | Schedule J: Your Expenses (Offici Copy your monthly expenses from | | | \$ | 2,972.00 |
| Par | 4: Answer These Questions for | or Administrative and Sta | tistical Records | | |
| 6. | Are you filing for bankruptcy un ☐ No. You have nothing to repo | | ? Check this box and submit this form to the court with yo | ur other ទ | schedules. |
| 7. | ■ Yes What kind of debt do you have? | | | | |
| | | | debts are those "incurred by an individual primarily for | a person | al, family, or |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,731.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total cla | im |
|--|-----------|----------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 5,270.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 5,270.00 |

| | n this information | | | | | | | |
|-------|---|--------------------------|---------------------|--------|---|--|---|---|
| Deb | | andra F. Tarı st Name | | Name | Last Name | | | |
| Deb | tor 2 | | | | | | | |
| (Spoi | se, if filing) Firs | st Name | Middle | Name | Last Name | | | |
| Unit | ed States Bankrupt | tcy Court for th | ne: EASTERN | DISTRI | ICT OF MICHIGAN | | | |
| Cas | e number | | | | | | | ☐ Check if this is an |
| | | | | | | | | amended filing |
| | | | | | | | | |
|)ff | icial Form | 106A/B | | | | | | |
| Sc | hedule A | /B: Pro | perty | | | | | 12/15 |
| | er every question. | ŕ | • | | his form. On the top of any additional pag I Estate You Own or Have an Interest In | ges, write your | name and case | number (if known). |
| | No. Go to Part 2. | | | | | | | |
| - | Yes. Where is the pr | roperty? | | | | | | |
| | Yes. Where is the pr | roperty? | | What | t is the property? Check all that apply | | | |
| | 10854 Ludlow | , , | | What | t is the property? Check all that apply Single-family home | | | ims or exemptions. Put |
| | ĺ | , , | ption | What | Single-family home Duplex or multi-unit building | the amoun | it of any secured | ims or exemptions. Put d claims on Schedule D: ns Secured by Property. |
| | 10854 Ludlow | , , | ption | | Single-family home Duplex or multi-unit building | the amoun | t of any secured Who Have Clain | d claims on Schedule D: ns Secured by Property. |
| | 10854 Ludlow Street address, if availal | ble, or other descri | ption 48070-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | Current va | nt of any secured Who Have Clain alue of the perty? | d claims on Schedule D: as Secured by Property. Current value of the portion you own? |
| | 10854 Ludlow Street address, if availal | ble, or other descri | | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property | Current va | it of any secured Who Have Clain alue of the | d claims on Schedule D: as Secured by Property. Current value of the |
| | 10854 Ludlow Street address, if availal Huntington Woods | ble, or other descri | 48070-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | Current vientire pro | alue of the perty? 95,000.00 the nature of ye | Current value of the portion you own? \$295,000.00 |
| | 10854 Ludlow Street address, if availal Huntington Woods | ble, or other descri | 48070-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | Current vientire pro \$2 Describe (such as f | alue of the perty? 95,000.00 the nature of ye | d claims on Schedule D: as Secured by Property. Current value of the portion you own? \$295,000.00 |
| | 10854 Ludlow Street address, if availal Huntington Woods City | ble, or other descri | 48070-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other | Current vientire pro \$2 Describe (such as f | alue of the perty? 95,000.00 the nature of ye e simple, tena | Current value of the portion you own? \$295,000.00 |
| | 10854 Ludlow Street address, if availal Huntington Woods City Oakland | ble, or other descri | 48070-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only | Current vientire pro \$2 Describe (such as f | alue of the perty? 95,000.00 the nature of ye e simple, tena | Current value of the portion you own? \$295,000.00 |
| | 10854 Ludlow Street address, if availal Huntington Woods City | ble, or other descri | 48070-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Current veentire pro \$2 Describe (such as fallife esta | alue of the perty? 95,000.00 the nature of ye se simple, tense, if known. | Current value of the portion you own? \$295,000.00 |
| | 10854 Ludlow Street address, if availal Huntington Woods City Oakland | ble, or other descri | 48070-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current veentire pro \$2 Describe (such as fa a life esta | alue of the perty? 95,000.00 the nature of ye se simple, tenate), if known. | Current value of the portion you own? \$295,000.00 our ownership interest ancy by the entireties, or |
| | 10854 Ludlow Street address, if availal Huntington Woods City Oakland | ble, or other descri | 48070-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Current veentire pro \$2 Describe (such as fa a life esta | alue of the perty? 95,000.00 the nature of ye se simple, tenate), if known. | Current value of the portion you own? \$295,000.00 our ownership interest ancy by the entireties, or |
| 1.1 | 10854 Ludlow Street address, if availal Huntington Woods City Oakland | ble, or other descri | 48070-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another or information you wish to add about this | Current veentire pro \$2 Describe (such as fa a life esta | alue of the perty? 95,000.00 the nature of ye se simple, tenate), if known. | Current value of the portion you own? \$295,000.00 our ownership interest ancy by the entireties, or |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| Debt | or 1 <u>S</u> | andra F. Ta | rnopol | | Case number (if k | known) | |
|--------------|-----------------------|---|--|--|----------------------|-------------------|--|
| 3. Ca | rs, vans, | trucks, tract | ors, sport utility ve | hicles, motorcycles | | | |
| | No | | | | | | |
| | Yes | | | | | | |
| _ | 163 | | | | | | |
| 3.1 | Make: | Chevrole | t | Who has an interest in the property? Check one | | | s or exemptions. Put |
| | Model: | Volt | | ■ Debtor 1 only | | | laims on Schedule D: Secured by Property. |
| | Year: | 2018 | | ☐ Debtor 2 only | Current va | alue of the (| Current value of the |
| | | nate mileage: | 12000 | Debtor 1 and Debtor 2 only | entire pro | perty? p | ortion you own? |
| | | ormation: | Debtor has | ☐ At least one of the debtors and another | | | |
| | | nership inte | | ☐ Check if this is community property | | \$0.00 | \$0.00 |
| | | | | (see instructions) | | | |
| 5 Ac | Yes dd the do | have attache | ed for Part 2. Write | n for all of your entries from Part 2, including that number here | | .=> | \$0.00 |
| | | | nal and Household Ite | | | 0 | mant value of the |
| ро у | ou own c | or nave any i | egai or equitable in | terest in any of the following items? | | po i Do | rrent value of the rtion you own? not deduct secured ms or exemptions. |
| | | | usual househole to, small appliate tools and suppl | d goods and furnishings, including but inces, bedding, kitchenware and supplies ies, assorted household tools, furnishing, lamps, and decorative items of neglig | s, cleaning gs, | _ | \$2,300.00 |
| | | | | | | | |
| <i>E</i> : | | Televisions a including cell | | eo, stereo, and digital equipment; computers, prin nedia players, games | nters, scanners; n | nusic collections | s; electronic devices |
| | | | | electronic devices, including television(s blets, cell phones and assorted chargers | | _ | \$500.00 |
| <i>E</i> : | xamples: | other collection | figurines; paintings, ons, memorabilia, col | prints, or other artwork; books, pictures, or other llectibles | art objects; stamp | o, coin, or basel | oall card collections; |
| E | xamples: | for sports and Sports, photo musical instru | graphic, exercise, an | d other hobby equipment; bicycles, pool tables, | golf clubs, skis; ca | anoes and kaya | ks; carpentry tools; |
| _ | No | | | | | | |
| | Yes. De al Form 10 | | | Schedule A/B: Property | | | page 2 |

| Debtor ' | Sandra F. Tarnopol | | Case number (if know | 7) |
|-------------------|--------------------------------|---|---|--|
| | | | | |
| 10. Fire : | arms | | | |
| - | mples: Pistols, rifles, shotgu | ns, ammunition, and | related equipment | |
| □No | • | • | • • | |
| | es. Describe | | | |
| — 16 | ss. Describe | | | |
| | alath: | | athing accompains | \$400.00 |
| | Ciotni | ng, snoes and cic | othing accessories | \$400.00 |
| | | | | |
| 11. Clot | hes | | | |
| | | s, leather coats, des | igner wear, shoes, accessories | |
| ■ No | | , | | |
| | es. Describe | | | |
| □ 16 | ss. Describe | | | |
| 12. Jew | elrv | | | |
| | | stume jewelry, engaç | gement rings, wedding rings, heirloom jewelry, watches, gems | , gold, silver |
| | | , , , | | |
| ■ Ye | es. Describe | | | |
| | .s. Describe | | | |
| | jewelr | | | \$400.00 |
| | jewen | <u>y</u> | | |
| | | | | |
| 13. Non | -farm animals | | | |
| | mples: Dogs, cats, birds, ho | rses | | |
| ■ No | · · | | | |
| | es. Describe | | | |
| □ 16 | es. Describe | | | |
| 14. Anv | other personal and house | hold items vou did | not already list, including any health aids you did not list | |
| ■ No | - | , | , , , , , , , , , , , , , , , , , , , | |
| _ | | | | |
| □ 16 | es. Give specific information | •••• | | |
| | | | | |
| 15. Ad | d the dollar value of all of | your entries from Pa | art 3, including any entries for pages you have attached | |
| | | | | \$3,600.00 |
| | | | | |
| | | | | |
| | Describe Your Financial Asset | | | |
| Do you | own or have any legal or e | quitable interest in | any of the following? | Current value of the |
| | | | | portion you own? Do not deduct secured |
| | | | | claims or exemptions. |
| | | | | oranno or oxomparono |
| 16. Cas l | h | | | |
| Exa | mples: Money you have in y | our wallet, in your ho | me, in a safe deposit box, and on hand when you file your per | ition |
| |) | | | |
| ■ Ye | es | | | |
| | | | | |
| | | | cash on hand | \$10.00 |
| | | | | |
| | | | | |
| | osits of money | | | |
| Exa | | | ounts; certificates of deposit; shares in credit unions, brokerag | e houses, and other similar |
| | • | ve multiple accounts | with the same institution, list each. | |
| | | | Institution name. | |
| ■ Ye | S | | Institution name: | |
| | | | estimated funds in bank account located at: | |
| | 17 1 | checking | Bank of America | \$138.00 |
| | 17.1. | | | |
| | | | | |
| 18. Bon | ds, mutual funds, or public | ly traded stocks | | |
| Exa | mples. Bond funds, investme | ent accounts with bro | okerage firms, money market accounts | |
| ■ No | | | | |
| | es | Institution or issuer r | name: | |

Official Form 106A/B Schedule A/B: Property page 3

| De | ebtor 1 | Sandra F. Tarnopol | Case number (if known) | |
|-----|---------------------------|---|--|---|
| 19. | • | ublicly traded stock and interests in incorp venture | porated and unincorporated businesses, including an interest | in an LLC, partnership, and |
| | ■ No | | | |
| | ☐ Yes. | Give specific information about them | | |
| 20. | Negot Non-n | | gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them. | |
| | ■ No | | | |
| | ⊔ Yes. | Give specific information about them Issuer name: | | |
| 21. | | ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), | 403(b), thrift savings accounts, or other pension or profit-sharing pl | ans |
| | ■ No | | | |
| | ☐ Yes. | List each account separately. Type of account: | Institution name: | |
| 22. | Your s | | so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications companie | es, or others |
| | No | | | |
| | ☐ Yes. | | Institution name or individual: | |
| 23. | _ | ties (A contract for a periodic payment of mon | ney to you, either for life or for a number of years) | |
| | ■ No □ Yes. | Issuer name and description. | | |
| 24. | | ts in an education IRA, in an account in a c C. §§ 530(b)(1), 529A(b), and 529(b)(1). | qualified ABLE program, or under a qualified state tuition prog | ram. |
| | ■ No □ Yes. | Institution name and description | on. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| 25. | Trusts ■ No | , equitable or future interests in property (| (other than anything listed in line 1), and rights or powers exerc | cisable for your benefit |
| | | Give specific information about them | | |
| | Exam | s, copyrights, trademarks, trade secrets, a poles: Internet domain names, websites, proceed | | |
| | ■ No | Give specific information about them | | |
| | Licens | ses, franchises, and other general intangible | | |
| | Exam _l ■ No | ples: Building permits, exclusive licenses, coo | operative association holdings, liquor licenses, professional licenses | 3 |
| | ☐ Yes. | Give specific information about them | | |
| Mo | oney or | property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | funds owed to you | | oraling of exemptions. |
| | ■ No □ Yes. | Give specific information about them, includir | ing whether you already filed the returns and the tax years | |
| 29. | | support | | |
| | ■ No | , | support, child support, maintenance, divorce settlement, property s | ettlement |
| | ☐ Yes. | Give specific information | | |

Official Form 106A/B Schedule A/B: Property page 4

| De | ebtor 1 | Sandra F. Tarnopol | Case number (if known) | |
|-----|---------------|---|--|----------------------------|
| 30. | | amounts someone owes you bles: Unpaid wages, disability insurance payments, disal benefits; unpaid loans you made to someone else | bility benefits, sick pay, vacation pay, workers' comper | nsation, Social Security |
| | No | , , | | |
| | ☐ Yes. | Give specific information | | |
| 31. | | ts in insurance policies o/es: Health, disability, or life insurance; health savings a | account (HSA); credit, homeowner's, or renter's insurar | nce |
| | ■ No | | | |
| | ☐ Yes. | Name the insurance company of each policy and list its Company name: | value. Beneficiary: | Surrender or refund value: |
| 22 | Any in | erest in property that is due you from someone who | has died | |
| | If you a | are the beneficiary of a living trust, expect proceeds from the has died. | | eive property because |
| | ■ No | Cive an acitic information | | |
| | ⊔ Yes. | Give specific information | | |
| | _Examp | against third parties, whether or not you have filed oles: Accidents, employment disputes, insurance claims | | |
| | ■ No □ Yes | Describe each claim | | |
| | | | | |
| | _ | contingent and unliquidated claims of every nature, | including counterclaims of the debtor and rights to | set off claims |
| | ■ No □ Yes | Describe each claim | | |
| | | | | |
| | Any fin ■ No | ancial assets you did not already list | | |
| | _ | Give specific information | | |
| | | · | | |
| 36 | | he dollar value of all of your entries from Part 4, incl art 4. Write that number here | | \$148.00 |
| Pa | rt 5: De | scribe Any Business-Related Property You Own or Have an | Interest In. List any real estate in Part 1. | |
| 37 | Do you d | own or have any legal or equitable interest in any business- | related property? | |
| _ | | to Part 6. | related property: | |
| _ | _ | Go to line 38. | | |
| | | | | |
| Pa | | scribe Any Farm- and Commercial Fishing-Related Property ou own or have an interest in farmland, list it in Part 1. | y You Own or Have an Interest In. | |
| 46. | Do vou | own or have any legal or equitable interest in any f | arm- or commercial fishing-related property? | |
| | ` | Go to Part 7. | g | |
| | ☐ Yes | . Go to line 47. | | |
| | | | | |
| Pa | rt 7: | Describe All Property You Own or Have an Interest in Tha | at You Did Not List Above | |
| 53. | | have other property of any kind you did not already bles: Season tickets, country club membership | / list? | |
| | ■ No | | | |
| | ☐ Yes. | Give specific information | | |
| 54 | . Add t | he dollar value of all of your entries from Part 7. Wri | te that number here | \$0.00 |
| | | • | | |

| Deb | tor 1 Sandra F. Tarnopol | | | Case number (if known) | |
|------|--|---|------------|------------------------------|--------------|
| Part | 8: List the Totals of Each Part of this Form | | | | |
| 55. | Part 1: Total real estate, line 2 | | | | \$295,000.00 |
| 56. | Part 2: Total vehicles, line 5 | | \$0.00 | | _ |
| 57. | Part 3: Total personal and household items, line 15 | | \$3,600.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$148.00 | | |
| 59. | Part 5: Total business-related property, line 45 | | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | | \$3,748.00 | Copy personal property total | \$3,748.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | | \$298,748.00 |

| Debtor 1 | Sandra F. Tarno | pol | | |
|--------------------|-----------------|-------------|-----------|-----------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is ar |

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| clothing, shoes and clothing | \$400.00 | | \$400.00 | Mich. Comp. Laws § |
|--|---|--|---|---|
| tablets, cell phones and assorted chargers and peripherals. Line from <i>Schedule A/B</i> : 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| assorted used electronic devices, including television(s), computer(s). | \$500.00 | | \$500.00 | Mich. Comp. Laws § 600.5451(1)(c) |
| usual household goods and furnishings, including but not limited to, small appliances, bedding, kitchenware and supplies, cleaning tools and supplies, assorted household tools, furnishings, ordinary furniture, lamps, and decorative items of negligble value Line from <i>Schedule A/B</i> : 6.1 | \$2,300.00 | | \$2,300.00 100% of fair market value, up to any applicable statutory limit | Mich. Comp. Laws § 600.5451(1)(c) |
| 48070 Oakland County Line from Schedule A/B: 1.1 | Ψ230,000.00 | | 100% of fair market value, up to any applicable statutory limit | 600.5451(1)(m) |
| 10854 Ludlow Huntington Woods, MI | | _ | \$52,463,80 | Mich. Comp. Laws § |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from | | | Specific laws that allow exemption |
| For any property you list on Schedule A/B | that you claim as exe | empt, | fill in the information below. | |
| ☐ You are claiming federal exemptions. 11 l | U.S.C. § 522(b)(2) | | | |
| ■ You are claiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | |
| Which set of exemptions are you claiming | ? Check one only, eve | n if yo | ur spouse is filing with you. | |
| | ■ You are claiming state and federal nonband You are claiming federal exemptions. 11 For any property you list on Schedule A/B Brief description of the property and line on Schedule A/B that lists this property 10854 Ludlow Huntington Woods, MI 48070 Oakland County Line from Schedule A/B: 1.1 usual household goods and furnishings, including but not limited to, small appliances, bedding, kitchenware and supplies, cleaning tools and supplies, assorted household tools, furnishings, ordinary furniture, lamps, and decorative items of negligble value Line from Schedule A/B: 6.1 assorted used electronic devices, including television(s), computer(s), tablets, cell phones and assorted chargers and peripherals. Line from Schedule A/B: 7.1 clothing, shoes and clothing | ■ You are claiming state and federal nonbankruptcy exemptions. □ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exemption of the property and line on Schedule A/B that lists this property □ Schedule A/B that lists this property □ Current value of the protein you own Copy the value from Schedule A/B □ 10854 Ludlow Huntington Woods, MI 48070 Oakland County □ Line from Schedule A/B: 1.1 □ Usual household goods and furnishings, including but not limited to, small appliances, bedding, kitchenware and supplies, cleaning tools and supplies, assorted household tools, furnishings, ordinary furniture, lamps, and decorative items of negligible value □ Line from Schedule A/B: 6.1 □ assorted used electronic devices, including television(s), computer(s), tablets, cell phones and assorted chargers and peripherals. □ Line from Schedule A/B: 7.1 □ Clothing, shoes and clothing \$400.00 | Tou are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, Brief description of the property and line on Schedule A/B that lists this property Brief description of the property and line on Schedule A/B that lists this property Copy the value of the portion you own Copy the value from Schedule A/B 10854 Ludlow Huntington Woods, MI 48070 Oakland County Line from Schedule A/B: 1.1 usual household goods and furnishings, including but not limited to, small appliances, bedding, kitchenware and supplies, cleaning tools and supplies, assorted household tools, furnishings, ordinary furniture, lamps, and decorative items of negligible value Line from Schedule A/B: 6.1 assorted used electronic devices, including television(s), computer(s), tablets, cell phones and assorted chargers and peripherals. Line from Schedule A/B: 7.1 clothing, shoes and clothing \$400.00 | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that lists this property Copy the value from Schedule A/B. 10854 Ludlow Huntington Woods, MI 48070 Oakland County Line from Schedule A/B: 1.1 Usual household goods and furnishings, including but not limited to, small appliances, bedding, kitchenware and supplies, cleaning tools and supplies, assorted household tools, furnishings, ordinary furniture, lamps, and decorative items of negligible value Line from Schedule A/B: 6.1 assorted used electronic devices, including television(s), computer(s), tablets, cell phones and assorted chargers and peripherals. Line from Schedule A/B: 7.1 clothing, shoes and clothing Amount of the exemption or he portion you own Check only one box for each exemption. Check only one box for each exemption. |

Official Form 106C

Schedule C: The Property You Claim as Exempt

100% of fair market value, up to any applicable statutory limit

page 1 of 2

Line from Schedule A/B: 10.1

Part 1: Identify the Property You Claim as Exempt

| | Current value of the Amount of the exemption you claim portion you own | | ount of the exemption you claim | Specific laws that allow exemption |
|--|--|---|--|---|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| • | \$400.00 | \$400.00 | | Mich. Comp. Laws § 600.5451(1)(c) |
| ie nom denedate A/D. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | 000.0401(1)(0) |
| | \$10.00 | | \$10.00 | 42 U.S.C. § 407 |
| ie IIIIII Schedule AVB. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| • | \$138.00 | | \$138.00 | 42 U.S.C. § 407 |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| ubject to adjustment on 4/01/19 and every No | 3 years after that for ca | ises fi | | |
| | subject to adjustment on 4/01/19 and every | welry ne from Schedule A/B: 12.1 ash on hand ne from Schedule A/B: 16.1 secking: estimated funds in bank account located at: Bank of America ne from Schedule A/B: 17.1 re you claiming a homestead exemption of more than \$160,37 subject to adjustment on 4/01/19 and every 3 years after that for call | welry ne from Schedule A/B: 12.1 ash on hand ne from Schedule A/B: 16.1 ash on band ne from Schedule A/B: 16.1 | welry ne from Schedule A/B: 12.1 \$400.00 \$400.00 \$400.00 \$400.00 \$100% of fair market value, up to any applicable statutory limit \$10.00 \$100% of fair market value, up to any applicable statutory limit \$10.00 \$100% of fair market value, up to any applicable statutory limit \$10.00 \$100% of fair market value, up to any applicable statutory limit \$10.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit |

| Filli | in this inform | ation to identify you | r case: | | | |
|---|------------------|--------------------------|--|-----------------------------------|---|--|
| | | Sandra F. Tarno | pol | | - | |
| | | First Name | Middle Name Last Name | | - | |
| Unit | ed States Ban | kruptcy Court for the: | EASTERN DISTRICT OF MICHIGAN | | | |
| Cas | e number | | | | - | |
| | | | | | _ | |
| Offi | cial Form | 106D | | | | |
| Sc | hedule [| D: Creditors | Who Have Claims Secure | d by Propert | У | 12/15 |
| is nee | eded, copy the | | | | | |
| | , , | nave claims secured by | your property? | | | |
| | ☐ No. Check | this box and submit th | is form to the court with your other schedules. Y | ou have nothing else | to report on this form. | |
| | Yes. Fill in | all of the information b | pelow | - | | |
| | | | , | | | |
| | | | Middle Name Last Name Middle Name Last Name Last Name | | | |
| for e | ach claim. If mo | re than one creditor has | a particular claim, list the other creditors in Part 2. As | Amount of claim Do not deduct the | that supports this | portion |
| 2.1 | Chase Mtg | | Describe the property that secures the claim: | | | |
| | Creditor's Name | | | | | |
| | | | apply. | | | |
| | | | _ | | | |
| | rumber, eneet, v | ony, otato a zip oode | _ · | | | |
| Who | owes the deb | ot? Check one. | | | | amended filing 12/15 Ing correct information. If more space ges, write your name and case ort on this form. Column C Unsecured portion If any |
| | ebtor 1 only | | | cured | | |
| | ebtor 2 only | | car loan) | | exponsible for supplying correct information. If more space op of any additional pages, write your name and case e nothing else to report on this form. Jumn A | |
| | ebtor 1 and Deb | otor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| Dabtor 2 (Spouse I, Ring) First Name | | | | | | |
| | | | Other (including a right to offset) | | | |
| Date | deht was incu | 12/31/07 Last Active | Last 4 digits of account number 7088 | | | |

Date debt was incurred 2/01/19

Last 4 digits of account number

| Debtor 1 Sandra F. Tarnopol | | Case number (if known) | | |
|--|--|------------------------|--------------|--------|
| First Name Middle N | ame Last Name | | | |
| City of Huntington Woods | Describe the property that secures the claim: | \$936.20 | \$295,000.00 | \$0.00 |
| Creditor's Name | 10854 Ludlow Huntington Woods, MI 48070 Oakland County | | | |
| 26815 Scotia Road Huntington Woods, MI 48070 | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only □ Debtor 2 only | ☐ An agreement you made (such as mortgage or secar loan) | ecured | | |
| Debtor 1 and Debtor 2 only | ■ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred 2019 | Last 4 digits of account number 4430 | | | |
| | | | | |
| Add the dollar value of your entries in C | column A on this page. Write that number here: | \$242,536. | 20 | |
| If this is the last page of your form, add Write that number here: | the dollar value totals from all pages. | \$242,536. | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

| Fill in th | his informat | ion to identify your ca | ase: | | | | | |
|--|---|---|---|---|---|---|---|---|
| Debtor ' | | Sandra F. Tarnopo | Middle Nam | e | Last Name | | | |
| Debtor 2 (Spouse if | 2 | First Name | Middle Nam | | Last Name | | | |
| | | uptcy Court for the: | | STRICT OF MICH | | | | |
| Case nu (if known) | umber | | _ | | | | | theck if this is an mended filing |
| Sche | | : Creditors WI | | | | | | 12/15 |
| any exect Schedule Schedule left. Attac name and | utory contracts G: Executory D: Creditors Ch the Continud case number | ts or unexpired leases to y Contracts and Unexpir Who Have Claims Secu- uation Page to this page er (if known). | hat could result red Leases (Offic red by Property. . If you have no | in a claim. Also li: cial Form 106G). Do If more space is r information to rep | st executory o not include needed, copy | Part 2 for creditors with N contracts on Schedule A/E any creditors with partiall the Part you need, fill it ou do not file that Part. On the | : Property (Offici y secured claims it, number the en | al Form 106A/B) and on that are listed in tries in the boxes on the |
| Part 1: | List All o | f Your PRIORITY Uns | secured Claim | 5 | | | | |
| | • | have priority unsecured | claims against | you? | | | | |
| | No. Go to Part | 2. | | | | | | |
| □ Y | es. | | | | | | | |
| Part 2: | List All o | f Your NONPRIORITY | ' Unsecured C | laims | | | | |
| 3. Do a | any creditors | have nonpriority unsecu | ıred claims agai | nst you? | | | | |
| | No. You have r | nothing to report in this par | rt. Submit this for | m to the court with | vour other sch | edules. | | |
| ■ Y | | | | · | • | | | |
| unse | ecured claim, li one creditor h | st the creditor separately | for each claim. F | or each claim listed, | , identify what | o holds each claim. If a cre type of claim it is. Do not list n three nonpriority unsecured | claims already inc | luded in Part 1. If more |
| ran | | | | | | | | Total claim |
| 4.1 | AAA Insur | ance | L | ast 4 digits of acco | ount number | | | \$0.00 |
| | Nonpriority Cr | | | g | | | | Ψ0.00 |
| | 1 Auto Clu | | W | hen was the debt | incurred? | 2019 | | _ |
| _ | Dearborn, | MI 48126 et City State Zip Code | | s of the date you f | ile the claim | is: Check all that apply | | |
| | | d the debt? Check one. | ^ | s of the date you h | no, the olumn | is. Oneok all that apply | | |
| | ■ Debtor 1 c | | г | Contingent | | | | |
| | _ | • | | Unliquidated | | | | |
| | Debtor 2 c | - | | _ | | | | |
| | _ | and Debtor 2 only | _ | Disputed /pe of NONPRIOR | ITV unsocure | ad claim: | | |
| | | ne of the debtors and anot | г | Student loans | unsecule | a viaiiii. | | |
| | debt | his claim is for a comm | unity [| | | aration agreement or divorce | that you did not | |
| | ■ No | • | | | | ng plans, and other similar d | ebts | |
| | ☐ Yes | | | Other, Specify | • | | - | |
| | 103 | | | Uther Specify 🤇 | account St | uicu | | |

| Amex | Last 4 digits of account number | 3913 | \$1,057 |
|--|--|---|---------|
| Nonpriority Creditor's Name | | Opened 01/17 Last Active | |
| P.o. Box 981537 El Paso, TX 79998 | When was the debt incurred? | Opened 01/17 Last Active 2/08/19 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Credit Card | 1 | |
| AT&T U-verse | Last 4 digits of account number | | taga |
| Nonpriority Creditor's Name | Last 4 digits of account number | | \$282 |
| Attn: Bankruptcy Dept. 1801 Valley View Lane | When was the debt incurred? | 2019 | |
| Farmers Branch, TX 75234 | — As of the data way file the plains | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | IS: Check all that apply | |
| Debtor 1 only | Пол | | |
| _ | Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| At least one of the debtors and another | Student loans | u Claini. | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify account st | ated | |
| Bank Of America | Last 4 digits of account number | 9156 | \$972 |
| Nonpriority Creditor's Name | | Opened 06/16 Last Active | |
| Po Box 982238 El Paso, TX 79998 | When was the debt incurred? | 1/21/19 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | ,, , , , , , , | on one an inat apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| • | • • | i | |

| | Best Buy/cbna Nonpriority Creditor's Name | Last 4 digits of account number | 7247 | \$1,839 |
|---|--|---|--|---------|
| į | 50 Northwest Point Road Elk Grove Village, IL 60007 | When was the debt incurred? | Opened 12/13 Last Active 2/14/19 | |
| 1 | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| _ | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | Lateta. | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| • | ☐ Check if this claim is for a community | | ration agreement or divorce that you did not | |
| | s the claim subject to offset? | report as priority claims | a plane, and other circilar debte | |
| | No | ☐ Debts to pension or profit-sharing | | |
| I | ☐ Yes | Other. Specify Charge Acc | count | |
| | Cap1/neimn Nonpriority Creditor's Name | Last 4 digits of account number | 2059 | \$326 |
| 2 | Ronpriority Creditor's Name 26525 N Riverwoods Blvd Mettawa, IL 60045 | When was the debt incurred? | Opened 05/93 Last Active 12/12/18 | |
| 1 | Number Street City State Zip Code | As of the date you file, the claim | s: Check all that apply | |
| ١ | Who incurred the debt? Check one. | | | |
| ı | Debtor 1 only | ☐ Contingent | | |
| [| Debtor 2 only | ☐ Unliquidated | | |
| I | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| I | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| (| ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| I | s the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| I | ☐Yes | Other. Specify Charge Acc | count | |
| | Comcast Cable Nonpriority Creditor's Name | Last 4 digits of account number | | \$310 |
| ļ | PO Box 3006 Southeastern, PA 19398-3006 | When was the debt incurred? | 2019 | |
| | Number Street City State Zip Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| _ | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | d alatan | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| C | ☐ Check if this claim is for a community debt s the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | INC. | - Popio to bengion of biolit-stigill | g plano, and outer similar debis | |

| DTC C | Land A. Parkanak | 0070 | 11 |
|---|---|---|------------------|
| DTE Energy Nonpriority Creditor's Name | Last 4 digits of account number | 8079 | Unknowr |
| Attn: Bankruptcy Department One Energy Plaza 735 W.C.B. | When was the debt incurred? | 2019 | |
| Detroit, MI 48226 Number Street City State Zip Code | As of the date you file, the claim | is. Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim | в. Спеск ан тат арру | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| lebt s the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| ☐ Yes | Other Specify Utility bill | | |
| GM Financial Leasing | Last 4 digits of account number | 9653 | \$7,751.00 |
| Nonpriority Creditor's Name PO Box 183853 | When was the debt incurred? | 2019 | 41,101100 |
| Arlington, TX 76096 Jumber Street City State Zip Code Incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| _ | | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d alaim. | |
| At least one of the debtors and another | Student loans | d Claim: | |
| ☐ Check if this claim is for a community lebt sthe claim subject to offset? | _ | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | an along and other similar debte | |
| ■ No □ Yes | Other. Specify account sta | | |
| | Other. Specify | | |
| HC Processing Center Nonpriority Creditor's Name | Last 4 digits of account number | 5802 | \$310.00 |
| PO Box 708670 Sandy, UT 84070-8670 | When was the debt incurred? | 2019 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not | | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify account sta | ated | |

| Hccredit/mabtc | Last 4 digits of account number | 3580 | \$2,767.00 |
|--|--|---|------------|
| Nonpriority Creditor's Name | | Opened 01/18 Last Active | |
| Po Box 829 Springdale, AR 72765 | When was the debt incurred? | 12/12/18 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Hebrew Free Loans | Last 4 digits of account number | | \$5.000.00 |
| Nonpriority Creditor's Name 6735 Telegraph Road, Ste #300 | When was the debt incurred? | | Ψο,οοοιο |
| Bloomfield Hills, MI 48301 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify account sta | ated | |
| Kohls/capone | Last 4 digits of account number | 6120 | \$2,959.00 |
| Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr | | Opened 01/13 Last Active | |
| Menomonee Falls, WI 53051 | When was the debt incurred? | 12/12/18 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Charge Acc | count | |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 9

| Sandra F. Tarnopol | Case number (if known) | | | | | |
|--|---|---|----------|--|--|--|
| Macys/dsnb | Last 4 digits of account number | 3714 | \$243. | | | |
| Nonpriority Creditor's Name Po Box 8218 Mason, OH 45040 | When was the debt incurred? | | | | | |
| Number Street City State Zip Code | As of the date you file, the claim i | As of the date you file, the claim is: Check all that apply | | | | |
| Who incurred the debt? Check one. | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| ☐ Check if this claim is for a community | | Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | | | | | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| Yes | Other. Specify Charge Acc | count | | | | |
| Navient | Last 4 digits of account number | 6928 | \$5,270. | | | |
| Nonpriority Creditor's Name | = | | | | | |
| Po Box 9655 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 05/08 Last Active 12/04/18 | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| ☐ Check if this claim is for a community | Student loans | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| ☐ Yes | Other. Specify | | | | | |
| | Educationa | I | | | | |
| Novara Yesija & Cantenacci, PLLC | Last 4 digits of account number | | \$975. | | | |
| Nonpriority Creditor's Name for Flood Solutions, Inc. 2000 Town Center #2w370 48075 | When was the debt incurred? | 2019 | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | | | |
| Is the claim subject to offset? | report as priority claims | <u> </u> | | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| □Yes | Other. Specify account sta | ated | | | | |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 9

| Paypal Credit | Last 4 digits of account number | 7559 | \$2,407.0 | | | |
|--|---|---|-----------|--|--|--|
| Nonpriority Creditor's Name PO BOX 5138 Lutherville Timonium, MD 21094 | When was the debt incurred? | 2019 | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| Check if this claim is for a community | Student loans | | | | | |
| debt Is the claim subject to offset? — | report as priority claims | aration agreement or divorce that you did not | | | | |
| No | Debts to pension or profit-sharing | | | | | |
| Yes | Other. Specify account sta | ated | | | | |
| Syncb/art Van Furnitur Nonpriority Creditor's Name | Last 4 digits of account number | 0311 | \$2,199.0 | | | |
| C/o Po Box 965036 Orlando, FL 32896 | When was the debt incurred? | Opened 06/15 Last Active 1/11/19 | | | | |
| Jumber Street City State Zip Code Vho incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| Check if this claim is for a community | Student loans | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | | | | |
| ■ No | ☐ Debts to pension or profit-sharin | | | | | |
| Yes | ■ Other. Specify Charge Acc | | | | | |
| Syncb/care Credit | Last 4 digits of account number | 8924 | \$1,608.0 | | | |
| Nonpriority Creditor's Name | _ | | | | | |
| C/o Po Box 965036 Orlando, FL 32896 | When was the debt incurred? | Opened 03/18 Last Active 12/19/18 | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated ☐ Disputed | | | | | |
| Debtor 1 and Debtor 2 only | | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| Check if this claim is for a community | Student loans | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| No | Debts to pension or profit-sharing | | | | | |
| □ Yes | ■ Other. Specify Charge Acc | count | | | | |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

| Debt | or 1 Sandra F. Tarnopol | Case number (if known) | | | | | | |
|----------|---|--|---|------------|--|--|--|--|
| 4.2 0 | Syncb/tjx Cos | Last 4 digits of account number | 5206 | \$486.00 | | | | |
| | Nonpriority Creditor's Name Po Box 965015 Orlando, FL 32896 | When was the debt incurred? | Opened 09/14 Last Active 12/24/18 | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Charge Acc | count | | | | | |
| 4.2 1 | Td Bank Usa/targetcred | Last 4 digits of account number | 4909 | \$2,388.00 | | | | |
| | Nonpriority Creditor's Name Po Box 673 Minneapolis, MN 55440 | When was the debt incurred? | Opened 03/16 Last Active 12/14/18 | | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | , | Chook an inat apply | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa | | | | | | |
| | No | report as priority claims | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | ■ No □ Yes | | Other. Specify Credit Card | | | | | |
| | La Tes | Other. Specify Oredit Care | <u>'</u> | | | | | |
| 4.2 2 | Thd/cbna | Last 4 digits of account number | 8253 | \$710.00 | | | | |
| | Nonpriority Creditor's Name Po Box 6497 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 05/16 Last Active 12/13/18 | | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | □ Debtor 1 and Debtor 2 only □ Disputed | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | d claim: | | | | | |
| | ☐ Check if this claim is for a community | | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | □ Yes | ■ Other Specify Charge Acc | | | | | | |
| | 00 | Other. Specify | | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 9

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | 7 | Total Claim |
|--------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | 1 | Total Claim |
| | 6f. | Student loans | 6f. | \$ | 5,270.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 34,589.73 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 39,859.73 |

| Fill in this infor | | | | | |
|---|------------------|--------------------|-------------|--|-----------------------|
| Debtor 1 | Sandra F. Tarnop | ol | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | EASTERN DISTRICT C | PF MICHIGAN | | |
| Case number | | | | | Charlette to the |
| (II KHOWH) | | | | | ☐ Check if this is an |
| | | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 Gm Financial | Acct# 112012429653 |
| Po Box 181145 | Opened 07/18 |
| Arlington, TX 76096 | Lease |

| Debtor 1 Debtor 2 | Sandra F. Tarnop | ol | | | |
|-------------------------|---|------------------------|---|--|--|
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse if, fi | First Name | Middle Name | Last Name | | |
| United St | tates Bankruptcy Court for the: | EASTERN DISTRICT O | OF MICHIGAN | | |
| Case nun | nber | | | | ☐ Check if this is an amended filing |
| | al Form 106H | obtoro | | | 4045 |
| <u>scne</u> | dule H: Your Cod | eptors | | | 12/15 |
| Arizo | - | Nevada, New Mexico, Pu | erto Rico, Texas, Wash | | states and territories include |
| | -l 4 list all af dabt | | spouse as a codebtor | | |
| in lin Form | ne 2 again as a codebtor only i | | tor or cosigner. Make | 6G). Use Schedule D, S | ywith you. List the person showr e creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi |
| in lin Form | ne 2 again as a codebtor only i n 106D), Schedule E/F (Official | Form 106E/F), or Sched | tor or cosigner. Make | 6G). Use Schedule D, S | e creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi ditor to whom you owe the debt |
| in lin Form out C | ne 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. **Column 1: Your codebtor** | Form 106E/F), or Sched | tor or cosigner. Make | Column 2: The cre Check all schedule | e creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi ditor to whom you owe the debt s that apply: |
| in lin Form | ne 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. **Column 1: Your codebtor** | Form 106E/F), or Sched | tor or cosigner. Make | Column 2: The cre | e creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi ditor to whom you owe the debt s that apply: |
| in lin Form out C | ne 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Zl | Form 106E/F), or Sched | tor or cosigner. Make | Column 2: The cre Check all schedule D, line | e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the debt of the deb |
| in lin Form out C | ne 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Zl | Form 106E/F), or Sched | tor or cosigner. Make | Column 2: The cre Check all schedule D, line Schedule D, line Schedule E/F, li | e creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi ditor to whom you owe the debt s that apply: |
| in lin Form out C | ne 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and ZI | P Code | ntor or cosigner. Make ule G (Official Form 10 | Column 2: The cre Check all schedule D, sind Schedule D, line Schedule E/F, li Schedule G, line | e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the debt of the deb |
| in lin Form out C | ne 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and ZI | P Code | ntor or cosigner. Make ule G (Official Form 10 | Column 2: The cre Check all schedule D, Si Schedule D, line Schedule E/F, li Schedule G, line Schedule D, line Schedule E/F, li Schedule D, line | e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the find to whom you owe the debt is that apply: |
| in lin Form out C | ne 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Zi | P Code | ntor or cosigner. Make ule G (Official Form 10 | Column 2: The cre Check all schedule D, since Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line | e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the find to whom you owe the debt is that apply: |

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19-44053-tjt Doc 1 Filed 03/20/19 Entered 03/20/19 10:57:53 Page 30 of 53

Page 1 of 1
Best Case Bankruptcy
Entered 03/20/19 10:57:53 Page 30 of 53

| Fill | in this information to identify your ca | ase: | | | | ļ | | | | |
|-------------|--|----------------------------|----------------------------------|------------------------|------|-------------|----------------|------------|------------------------------------|----------|
| De | btor 1 Sandra F. Ta | arnopol | | | | | | | | |
| 1 | btor 2 puse, if filing) | | | | _ | | | | | |
| Un | ited States Bankruptcy Court for the | : EASTERN DISTRICT | OF MICHIGAN | | | | | | | |
| | se number | | _ | | | Chec | k if this is | | | |
| (If k | nown) | | | | | l | n amende | - | | |
| | | | | | | | | | ng postpetition following date: | |
| 0 | fficial Form 106I | | | | | ī | /IM / DD/ \ | YYYY | | |
| S | chedule I: Your Inc | ome | | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and you ach a separate sheet to this form. The describe Employment | r spouse is not filing w | ith you, do not inclu | ıde infor | mati | on abou | t your sp | ouse. If n | nore space is | needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | Debtor 2 | 2 or non- | filing spouse | |
| | If you have more than one job, | Employment status | ■ Employed | | | | ☐ Employed | | | |
| | attach a separate page with information about additional employers. | Employment status | ☐ Not employed | | | | ☐ Not employed | | | |
| | | Occupation | part time hair s | part time hair stylist | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Edge Salon | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 6595 Orchard L West Bloomfiel | | | | | | | |
| | | How long employed t | here? 3 years | 5 | | | _ | | | |
| Pa | rt 2: Give Details About Mor | nthly Income | | | | | | | | |
| | imate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to r | eport for | any | line, write | e \$0 in the | space. Ir | nclude your noi | n-filing |
| • | ou or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the informatio | on for all | empl | oyers for | that perso | on on the | lines below. If | you need |
| | | | | | | For Del | btor 1 | | ebtor 2 or iling spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | | 830.66 | \$ | N/A | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add lir | ne 2 + line 3. | | 4. | \$ | 8: | 30.66 | \$ | N/A | |

| | | | | For | Debtor 1 | | Debtor 2 or filing spouse | |
|-----|---------------------------|--|----------------|-----------------|---------------|------|---------------------------|--------|
| | Сору | / line 4 here | 4. | \$ | 830.66 | \$ | N/A | |
| 5. | Lieta | all payroll deductions: | | | | | | |
| J. | | • • | | Φ. | 440.00 | • | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$_ \$ | 148.68 | \$ | N/A | |
| | 5b. 5c. | Mandatory contributions for retirement plans Voluntary contributions for retirement plans | 5b. 5c. | \$ | 0.00 | \$ | N/A N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ [—] | 0.00 | \$— | N/A | |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$— | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$_ | 0.00 | \$ | N/A | |
| | 5h. | Other deductions. Specify: | 5h.+ | | | - \$ | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 148.68 | \$ | N/A | |
| 7. | Calcu | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 681.98 | \$ | N/A | |
| 8. | List a 8a. | All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | <u>*</u> — | 0.00 | \$ | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | N/A | |
| | 8e. | Social Security | 8e. | \$ | 1,402.00 | \$ | N/A | |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | _ 8f. _ 8g. | \$ | 0.00 | \$ | N/A N/A | |
| | 8h. | Other monthly income. Specify: rent from room mate | 8h.+ | · - | 700.00 | · — | N/A | |
| | 011. | tips | | \$ | 200.00 | \$ | N/A | |
| | | | _ , | | | | | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 2,302.00 | \$ | N/A | |
| 10. | Calcu | ulate monthly income. Add line 7 + line 9. | 10. \$ | : | 2,983.98 + \$ | | N/A = \$ 2, | 983.98 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | ' ' | | | | | |
| 11. | State Include other | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a | depen | | | | chedule J. 11. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain es | | | | | 12. \$ 2 , | 983.98 |
| 13. | Do ye | ou expect an increase or decrease within the year after you file this form? | ? | | | | monthly in | |
| | _ | Yes. Explain: | | | | | | |
| | _ | ·· T | | | | | | |

| - 80 | in this informa | ation to identify yo | our caca: | | | | | |
|---|----------------------------------|--|---------------------------|---|---|--------------------|-------------------|-------------------------------|
| | otor 1 | | | | | Che | ck if this is: | |
| Deb | 7.01 | Sandra F. Tarnopol | | | ☐ An amended filing | | | |
| Deb | otor 2 | | | | | | A supplement show | ving postpetition chapter |
| (Spouse, if filing) | | | | | | | 13 expenses as of | the following date: |
| Unit | ted States Bank | ruptcy Court for the | EASTE | RN DISTRICT OF MICHIG | AN | MM / DD / YYYY | | |
| | se number nown) | | | | | | | |
| O | fficial Fo | orm 106J | | | | | | |
| S | chedule | J: Your | Exper | ises | | | | 12/15 |
| info | ormation. If me mber (if know | nore space is ne vn). Answer eve ribe Your House | eded, atta ry question | If two married people ar ch another sheet to this to n. | | | | |
| | ■ No. Go to | o line 2. | in a separ | ate household? | | | | |
| | | lo | • | al Form 106J-2, <i>Expenses</i> | for Separate Housel | <i>hold</i> of Deb | otor 2. | |
| 2. | Do vou hav | e dependents? | ■ No | | | | | |
| _ | Do not list D Debtor 2. | • | □ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | Yes |
| | | | | | | | | □ No |
| • | D | | _ | | | | | ☐ Yes |
| 3. | expenses of yourself an | penses include of people other t d your depende | han ents? | No Yes | | | | |
| Est exp | imate your e | a date after the | our bankrı | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | h assistance an | | government assistance it luded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| • | | • | | | | | | |
| The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot. | | | | nclude first mortgage | 4. | \$ | 1,086.00 | |
| If not included in line 4: | | | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. | · | 0.00 |
| | • | erty, homeowner's | | | | 4b. | | 0.00 |
| | | • | | ipkeep expenses | | 4c. | | 0.00 |
| _ | | eowner's associa | | | | 4d. | · | 0.00 |
| 5. | Additional | mortgage paym | ents for yo | our residence , such as ho | me equity loans | 5. | 5 | 0.00 |

Official Form 106J Schedule J: Your Expenses

page 2

| Debtor 1 | Sandra F. Tarno | וטע | | |
|--|---|--|--|---|
| | First Name | Middle Name | Last Name | |
| ebtor 2 Spouse if, filing) | First Name | Middle Name | Last Name | |
| nited States Ba | ankruptcy Court for the: | EASTERN DISTRICT | OF MICHIGAN | |
| | | | | |
| case number known) | | | | ☐ Check if this is an amended filing |
| fficial Fori | m 106Dec | | | |
|)eclarat | tion About a | an Individua | Debtor's Schedu | les 12/1 |
| | | | | |
| wo married n | eonle are filing togethe | | | |
| • | | er, both are equally respo | onsible for supplying correct inform | ation. |
| ou must file the | is form whenever you f | er, both are equally responding the solution of the solution of the solution with a bar in connection with a bar | onsible for supplying correct informs | ation. false statement, concealing property, or |
| ou must file th otaining mone ears, or both. 1 | is form whenever you f | er, both are equally responding the solution of the solution of the solution with a bar in connection with a bar | onsible for supplying correct informs | ation. |
| ou must file the ptaining mone ears, or both. 1 | is form whenever you f y or property by fraud 18 U.S.C. §§ 152, 1341, n Below | er, both are equally respo file bankruptcy schedule in connection with a ban 1519, and 3571. | onsible for supplying correct informs | ation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20 |
| ou must file the ptaining mone ears, or both. 1 | is form whenever you f y or property by fraud 18 U.S.C. §§ 152, 1341, n Below | er, both are equally respo file bankruptcy schedule in connection with a ban 1519, and 3571. | onsible for supplying correct inform s or amended schedules. Making a kruptcy case can result in fines up | ation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20 |
| Did you pa | is form whenever you f y or property by fraud 18 U.S.C. §§ 152, 1341, n Below | er, both are equally respo file bankruptcy schedule in connection with a ban 1519, and 3571. | onsible for supplying correct informs or amended schedules. Making a kruptcy case can result in fines up | ation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms? attach Bankruptcy Petition Preparer's Notice, |
| Did you pa | is form whenever you if y or property by fraud 8 U.S.C. §§ 152, 1341, in Below Below Name of person | er, both are equally responser, both are equally response in connection with a band 1519, and 3571. | onsible for supplying correct informs or amended schedules. Making a kruptcy case can result in fines up | ation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms? attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| Did you pa Did you pa No Yes. Under penathat they ar X /s/ Sar | is form whenever you if y or property by fraud 18 U.S.C. §§ 152, 1341, in Below ay or agree to pay some Name of person alty of perjury, I declare the true and correct. | er, both are equally responser, both are equally response in connection with a band 1519, and 3571. | onsible for supplying correct informs or amended schedules. Making a kruptcy case can result in fines up | ation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms? attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| Did you pa Did you pa No Yes. Under penathat they ar X /s/ Sar Sandra | is form whenever you is yor property by fraud 8 U.S.C. §§ 152, 1341, in Below ay or agree to pay some Name of person alty of perjury, I declare the true and correct. | er, both are equally responser, both are equally response in connection with a band 1519, and 3571. | onsible for supplying correct informs or amended schedules. Making a kruptcy case can result in fines up | ation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms? attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| Did you pa Did you pa No Yes. Under penathat they ar X /s/ Sar Signatu | is form whenever you if y or property by fraud 18 U.S.C. §§ 152, 1341, in Below Any or agree to pay some alty of perjury, I declare the true and correct. Indra F. Tarnopol a F. Tarnopol | er, both are equally responser, both are equally response in connection with a band 1519, and 3571. | onsible for supplying correct informs or amended schedules. Making a kruptcy case can result in fines up rney to help you fill out bankruptcy mary and schedules filed with this X Signature of Debtor 2 | ation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms? attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

| Fill | in this inforn | nation to identify you | r case: | | | | | | | |
|---|--|---|--|---|---|---|--|--|--|--|
| | | | | | | | | | | |
| Der | otor 1 | Sandra F. Tarno First Name | Middle Name | Last Name | | | | | | |
| | otor 2 | | M: 18 A | | | | | | | |
| (Spo | use if, filing) | First Name | Middle Name | Last Name | | | | | | |
| Uni | ted States Ba | nkruptcy Court for the: | EASTERN DISTRICT OF | MICHIGAN | | | | | | |
| | se number | | | | _ | Check if this is an amended filing | | | | |
| Sta Be a info | s complete a | of Financial | attach a separate sheet to | re filing together, both are | ankruptcy equally responsible for sup y additional pages, write you | | | | | |
| Par | t 1: Give D | etails About Your Ma | rital Status and Where You | Lived Before | | | | | | |
| 1. | What is you | r current marital statu | ıs? | | | | | | | |
| | ☐ Married | | | | | | | | | |
| | ■ Not mar | ried | | | | | | | | |
| 2. | During the la | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | |
| | ■ No□ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | | |
| 3. state | | | | | ity property state or territor, ico, Texas, Washington and W | | | | | |
| | ■ No □ Yes. Ma | ake sure you fill out <i>Scl</i> | nedule H: Your Codebtors (Of | ficial Form 106H). | | | | | | |
| Par | t 2 Explai | n the Sources of You | r Income | | | | | | | |
| 4. | Fill in the total | d you have any income from employment or from operating a business during this year or the two previous calendar years? I in the total amount of income you received from all jobs and all businesses, including part-time activities. you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. | | | | | | | | |
| | □ No | | | | | | | | | |
| | Yes. Fill | in the details. | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | |
| From January 1 of current year until the date you filed for bankruptcy: | | | ■ Wages, commissions, bonuses, tips | \$1,857.50 | ☐ Wages, commissions, bonuses, tips | , | | | | |
| | | | □ Operating a business | | Operating a business | | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

| | | | | | Debtor 1 | | Debtor 2 | |
|----|--|----------------------------------|---|---|--|---|--|---|
| | | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | r last cal anuary 1 | | | 31, 2018) | ■ Wages, commissions, bonuses, tips | \$11,812.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | | | ☐ Operating a business | | ☐ Operating a business | |
| | | | | efore that: 31, 2017) | ■ Wages, commissions, bonuses, tips | \$11,675.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | | | ☐ Operating a business | | ☐ Operating a business | |
| 5. | Include and oth winning List eac | inco er po gs. If ch so | ome regard ublic bene you are fil | dless of wheth fit payments; ling a joint cas the gross inco | er that income is taxable. Ex pensions; rental income; inte e and you have income that | o previous calendar years? amples of other income are al rest; dividends; money collect you received together, list it o ately. Do not include income the | ted from lawsuits; royalties; and note under Debtor 1. | |
| | | | | | Debtor 1 | | Debtor 2 | |
| | | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | | | | nt year until nkruptcy: | Social Security Benefits | \$4,206.00 | | |
| | r last cal anuary 1 | | | 31, 2018) | Social Security Benefits | \$16,879.00 | | |
| | | | | efore that: 31, 2017) | social security & pension | \$16,497.00 | | |
| Pa | rt 3: L | .ist (| Certain Pa | ayments You | Made Before You Filed for | Bankruptcy | | |
| 6. | | her I | Debtor 1's | s or Debtor 2 st | s debts primarily consume | r debts? umer debts. Consumer debts | are defined in 11 U.S.C. § 10 | 01(8) as "incurred by an |
| | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. | | | | | | | |
| | | | ☐ Yes | paid that cre | | id a total of \$6,425* or more in ts for domestic support obligation in the sankruptcy case. | | |
| | | | * Subject | | | rs after that for cases filed on | or after the date of adjustmen | t. |
| | ■ Ye | | | | r both have primarily constreeyou filed for bankruptcy, d | umer debts. id you pay any creditor a total | of \$600 or more? | |
| | | | ■ No. | Go to line 7 | | | | |
| | | | ☐ Yes | include pay | | id a total of \$600 or more and obligations, such as child supp | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Del | otor 1 Sandra F. Tarnopol | | Cas | e number (if known) | | |
|-----|---|---|--|--|---------------------------------|---|
| | | | | | | |
| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this pa | yment for |
| 7. | Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | artners; relatives of any gene control, or owner of 20% or | eral partners; partners more of their voting | erships of which you g securities; and ar | u are a genera ly managing a | al partner; corporations gent, including one for |
| | ■ No□ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | nents or transfer a | ny property on ac | count of a de | ebt that benefited an |
| | No | | | | | |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment itor's name |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title | | | | | t or custody |
| | Case number | nature of the oase | ocurr or agency | | Otatas of th | 0 0000 |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address | | rty repossessed, f | oreclosed, garnis Date | hed, attached | I, seized, or levied? Value of the |
| | Orealtor Name and Address | . , | | Date | | property |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details. | | uding a bank or fir | nancial institution | , set off any a | mounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date a | action was | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | | rty in the possess | ion of an assigned | e for the bene | efit of creditors, a |

| Del | otor 1 Sandra F. Tarnopol | Case number | (if known) | |
|-----|---|---|---|---------------------------|
| | | | | |
| Pai | rt 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift. | tcy, did you give any gifts with a total value of more t | than \$600 per person | ? |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | |
| 14. | Within 2 years before you filed for bankrupt No | tcy, did you give any gifts or contributions with a tot | al value of more than | \$600 to any charity? |
| | Yes. Fill in the details for each gift or cont | tribution. | | |
| | Gifts or contributions to charities that total more than \$600 Charity's Name | al Describe what you contributed | Dates you contributed | Value |
| | Address (Number, Street, City, State and ZIP Code) | | | |
| Pai | rt 6: List Certain Losses | | | |
| 15. | Within 1 year before you filed for bankrupto or gambling? ■ No □ Yes. Fill in the details. | cy or since you filed for bankruptcy, did you lose any | thing because of the | it, fire, other disaster, |
| | - 100. Till ill the dotalle. | oscribo any insuranco sovorago for the loss | Date of your | Value of property |
| | how the loss occurred | escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Pai | t 7: List Certain Payments or Transfers | | | |
| 16. | Within 1 year before you filed for bankrupto consulted about seeking bankruptcy or pre | cy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? parers, or credit counseling agencies for services require | | rty to anyone you |
| | □ No | | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was | Amount of payment |
| | Email or website address Person Who Made the Payment, if Not You | ı | made | |
| | Law Offices of Marshall D. Schultz 29777 Telegraph Road, Suite 2203 Southfield, MI 48034 marshalld.schultz@gmail.com | Attorney Fees | 3/2019 | \$100.00 |
| | mar snanu.scriunz eginan.com | | | |
| 17. | promised to help you deal with your creditor. Do not include any payment or transfer that you | | or transfer any prope | rty to anyone who |
| | No | | | |
| | Yes. Fill in the details. | | _ | _ |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not | | | | | | | | | |
|-------------------|---|---|----------------|---|----------------------------|--------------|---|--------|---|--|
| | include gifts and transfers that you have already listed on this statement. No | | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | | rson Who Received Transfer dress | • | ion and v transfer | | payme | ibe any property or ents received or debts n exchange | | ate transfer was ade | |
| | Pei | rson's relationship to you | | | | | • | | | |
| 19. | | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | Na | me of trust | Descript | ion and v | alue of the pro | operty trans | ferred | | ate Transfer was ade | |
| Par | t 8: | List of Certain Financial Accounts, In | struments, Saf | e Deposi | Boxes, and S | Storage Unit | s | | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage | | | | | | | | | |
| | | ses, pension funds, cooperatives, asso No | | | | | i, silales III baliks, cieu | it uii | iolis, brokerage | |
| | | Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | | • | Last 4 digits of Type of account of account number instrument | | ount or | Date account was closed, sold, moved, or transferred | ı | Last balance before closing or transfer | |
| 21. | Do y | you now have, or did you have within 1 h, or other valuables? | year before yo | u filed for | bankruptcy, a | any safe dep | oosit box or other depos | sitory | y for securities, | |
| | | No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | | me of Financial Institution dress (Number, Street, City, State and ZIP Code) | | (Number, S | ess to it? treet, City, | Describe | the contents | | Do you still have it? | |
| 22. | Hav | e you stored property in a storage unit | or place other | than your | home within | 1 year befor | e you filed for bankrupt | cy? | | |
| | | No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | | me of Storage Facility dress (Number, Street, City, State and ZIP Code) | to it? | (Number, S | nad access | Describe | the contents | | Do you still have it? | |
| | | | | , | | | | | | |
| Par 23. | t 9: | Identify Property You Hold or Control you hold or control any property that so | | | ide any prope | rty you borr | rowed from are storing | for a | or hold in trust | |
| _0. | | someone. | | | ado any propo | , , ou 20 | onou nom, are cloning | , | | |
| | | No Yes. Fill in the details. | | | | | | | | |
| | | rner's Name dress (Number, Street, City, State and ZIP Code) | | the prop treet, City, S | erty? State and ZIP | Describe | the property | | Value | |
| Par | t 10: | Give Details About Environmental Inf | ormation | | | | | | | |

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? П Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ☐ Yes. Fill in the details. **Case Title** Nature of the case Court or agency Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed**

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Name
Address
(Number, Street, City, State and ZIP Code)

Date Issued

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

| Sandra F. Tarnopol | | Case number (if known) |
|---|---|---|
| | | |
| Part 12: Sign Below | | |
| are true and correct. I understand that m | | ts, and I declare under penalty of perjury that the answers erty, or obtaining money or property by fraud in connection to 20 years, or both. |
| /s/ Sandra F. Tarnopol | | |
| Sandra F. Tarnopol Signature of Debtor 1 | Signature of Debtor 2 | |
| Date March 18, 2019 | Date | |
| Did you attach additional pages to <i>Your</i> ■ No □ Yes | Statement of Financial Affairs for Individu | uals Filing for Bankruptcy (Official Form 107)? |
| Did you pay or agree to pay someone w | ho is not an attorney to help you fill out ba | ankruptcy forms? |
| ■ No | , , , | • • |

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

United States Bankruptcy Court Eastern District of Michigan

| In re | Sandra | a F. Tarnopol | Case N | lo | | | |
|---------|---|--|--------------------------------------|--|--|--|--|
| | | Debtor(s) | Chapte | 7 | | | |
| | | STATEMENT OF ATTORNEY FOR PURSUANT TO F.R.BANKR.I | | | | | |
| | The und | lersigned, pursuant to F.R.Bankr.P. 2016(b), states that: | | | | | |
| 1. | The und | dersigned is the attorney for the Debtor(s) in this case. | | | | | |
| 2. | The con | npensation paid or agreed to be paid by the Debtor(s) to the undersign FLAT FEE | ned is: [Check one] | | | | |
| | A. | For legal services rendered in contemplation of and in connection exclusive of the filing fee paid | | 600.00 | | | |
| | B. | Prior to filing this statement, received | | 100.00 | | | |
| | C. | The unpaid balance due and payable is | | 500.00 | | | |
| | [] | RETAINER | | | | | |
| | A. | Amount of retainer received | <u> </u> | | | | |
| | В. | The undersigned shall bill against the retainer at an hourly rate of agreed to pay all Court approved fees and expenses exceeding the | | hourly rate schedule.] Debtor(s) have | | | |
| 3. | \$ <u>335</u> | .00 of the filing fee has been paid. | | | | | |
| 4. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross that do not apply.] | | | | | | |
| | A. | Analysis of the debtor's financial situation, and rendering advice to bankruptcy; | the debtor in determini | ng whether to file a petition in | | | |
| | B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; | | | | | | |
| | D. — | Representation of the debtor in adversary proceedings and other co | entested bankruptcy mat | ters; | | | |
| | E. F. | Reaffirmations; Redemptions; | | | | | |
| | G. | Other: | | | | | |
| | | see attached fee agreement | | | | | |
| 5. | By agre | ement with the debtor(s), the above-disclosed fee does not include th see attached fee agreement | e following services: | | | | |
| 6. | The sou A. | rce of payments to the undersigned was from: XX Debtor(s)' earnings, wages, compensation for ser | rvices performed | | | | |
| | B. | Other (describe, including the identity of payor) | | | | | |
| 7. | | lersigned has not shared or agreed to share, with any other person, other icon, any compensation paid or to be paid except as follows: | her than with members of | of the undersigned's law firm or | | | |
| Dated: | Marc | h 18, 2019 | /s/ Marshall D. So | | | | |
| | | | 29777 Telegraph Southfield, MI 48 | ltz P38040 arshall D. Schultz Road, Suite 2203 | | | |
| Agreed: | /s/ Sa | andra F. Tarnopol | | | | | |
| - | Sand | ra F. Tarnopol | | | | | |
| | Debto | r | Debtor | | | | |

CHAPTER 7 BANKRUPTCY LEGAL SERVICES REPRESENTATION AND FEE AGREEMENT

The undersigned individual(s) hereby retains attorney, Marshall D. Schultz, ("Attorney") to file and represent Client(s) in a Chapter 7 Bankruptcy case, and agrees to pay Attorney a MAXIMUM agreed fee of \$_600_____plus costs including, but not limited to, the \$335.00 (if not waived) filing fee (or current fee) required to be paid to the U.S. Bankruptcy Court and any fee(s) incurred in retrieving credit or asset reports. This fee shall cover ONLY the following pre-petition and (quantum meriut) post-petition legal services provided in connection with the case as described below:

Please note: If all fees are not paid in full prior to filing Client understands and specifically agrees that:

Any Portion of the fee paid pre-filing shall cover:

- (1) Pre-petition consultations and analysis with Client regarding the Bankruptcy law as it relates to their particular situation, review of client provided documentation and review of Credit Reports and Public Records or commercially available Asset Reports.
- (2) Preparation of Bankruptcy Petition and Schedules, review of prepared pleadings, office consultation(s) with client to execute pleadings and filing Client's Chapter 7 Petition and Schedules based on the information provided and attested to by Client.

Any Portion of the fee paid post-filing shall be paid as QUANTUM MERIUT HOURLY post-petition services in an amount not to exceed the maximum agreed fee listed above and shall cover:

- (1) Amendments of Chapter 7 Schedules and pleadings, but NOT if Client's failure to provide complete or accurate information to Attorney causes the needed amendment.
- (2) Attending the initial Section 341 Meeting of Creditor and any other adjourned 341-7 hearing scheduled by the Court.
- (3) Client communications, including, but not limited to, e-mail, mail ,telephone and office consultations related to the Bankruptcy filing.
- (4) Trustee, U.S. Trustee and Creditor communications, including, but not limited to, e-mail, mail, telephone and office consultations related to the Bankruptcy filing.
- (5) Pre-court preparation consultation.

Client agrees and understands that the balance of any fee not paid prior to filing shall be paid prior to section 341 First Meeting of Creditors. The balance of this fee shall be construed as a fee for quantum meriut hourly post-petition services described above.

Client further agrees that any payments toward the maximum agreed fee made prior to filing Client's Chapter 7 case are not refundable based on the required preparatory work and responsibility assumed by Attorney.

Client also agrees that it is Client's sole obligation and responsibility to provide all of the necessary information with respect to personal information, income, assets and liabilities required to accurately complete the bankruptcy petition and schedules.

Client agrees to pay Attorney \$300.00 per hour for legal services which are required or requested by client to be provided by Attorney in addition to the above described services covered by the maximum agreed fee.

In the event the maximum agreed fee is not paid in full prior to filing, Client agrees to pay for ONLY QUANTUM MERIUT POST-PETITION SERVICES ON AN HOURLY BASIS up to the amount of the maximum agreed fee.

Client specifically agrees that unless Attorney agrees in writing, ATTORNEY IS NOT OBLIGATED TO DEFEND ANY ADVERSARY PROCEEDING OR CONTESTED MATTER filed against Client contesting the discharge of any debt or contesting the granting of a Discharge to Client by the Bankruptcy Court. Client understands that before Attorney will agree to defend any Adversary Proceeding or Contested Matter, Attorney will require advance payment of an adequate retainer fee, and will require that Client agree to pay \$300.00 per hour for legal services to be provided in connection with such defense.

Client specifically agrees that the Attorney will NOT represent Client in any matter regarding the Client's relationship with any credit reporting agency or the information contained on any credit bureau report for client or any co-debtor affected by client's bankruptcy or client's relationship with any utility companies or post-filing creditors.

Client understands that Attorney may be faced with a calendar conflict on certain dates. Client consents to the appearance of associate counsel or of-counsel to conduct this hearing if Attorney is faced with such a conflict. Client agrees that if Client is absent from the originally scheduled first meeting of creditors and a new hearing date is scheduled Client shall pay \$200.00 in fees for the additional post-petition court appearance.

Client understands that if Attorney recovers any pre-petition garnishment of wages or bank accounts the Attorney shall be compensated for this additional time and services in an amount equal to 33% of the monies recovered.

Client understands that one copy of the petition and schedules will be provided by the Attorney to the Client free of charge. Client agrees that reasonable retrieval and copying fee will be charged for any additional copies of the petition and or other documents requested by the Client that are contained in the Client's file.

Client agrees that all fees not paid prior to the filing of the Bankruptcy
Petition are fees for POST-PETITION services only.

By signing this Legal Services Representation and Fee Agreement, Client agrees to all the terms and conditions hereof, and certifies that he and/or she has read and understands this entire Agreement

Client/Debtor

Client/Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | | Liquidation |
|------------|---|--------------------|
| \$24 | 5 | filing fee |
| \$7 | 5 | administrative fee |
| + \$1 | 5 | trustee surcharge |
| \$33 | 5 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| _ | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

| in re | Sandra F. Tarnopoi | | Case No. | |
|---------|----------------------------------|--|-------------------|-----------------------|
| | | Debtor(s) | Chapter | 7 |
| | VER | IFICATION OF CREDITOR N | OR MATRIX | |
| The abo | ove-named Debtor hereby verifies | that the attached list of creditors is true and co | rrect to the best | of his/her knowledge. |
| Date: | March 18, 2019 | /s/ Sandra F. Tarnopol | | |
| | | Sandra F. Tarnopol | | |
| | | Signature of Debtor | | |

AAA Insurance 1 Auto Club Drive Dearborn, MI 48126

Amex P.o. Box 981537 El Paso, TX 79998

AT&T U-verse Attn: Bankruptcy Dept. 1801 Valley View Lane Farmers Branch, TX 75234

Bank Of America Po Box 982238 El Paso, TX 79998

Best Buy/cbna 50 Northwest Point Road Elk Grove Village, IL 60007

Cap1/neimn 26525 N Riverwoods Blvd Mettawa, IL 60045

Chase Mtg 700 Kansas Lane Monroe, LA 71203

City of Huntington Woods 26815 Scotia Road Huntington Woods, MI 48070

Comcast Cable PO Box 3006 Southeastern, PA 19398-3006

DTE Energy Attn: Bankruptcy Department One Energy Plaza 735 W.C.B. Detroit, MI 48226 Gm Financial Po Box 181145 Arlington, TX 76096

GM Financial Leasing PO Box 183853 Arlington, TX 76096

HC Processing Center PO Box 708670 Sandy, UT 84070-8670

Hccredit/mabtc Po Box 829 Springdale, AR 72765

Hebrew Free Loans 6735 Telegraph Road, Ste #300 Bloomfield Hills, MI 48301

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Macys/dsnb Po Box 8218 Mason, OH 45040

Navient Po Box 9655 Wilkes Barre, PA 18773

Novara Yesija & Cantenacci, PLLC for Flood Solutions, Inc. 2000 Town Center #2w370 48075

Paypal Credit PO BOX 5138 Lutherville Timonium, MD 21094

Syncb/art Van Furnitur C/o Po Box 965036 Orlando, FL 32896 Syncb/care Credit C/o Po Box 965036 Orlando, FL 32896

Syncb/tjx Cos Po Box 965015 Orlando, FL 32896

Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440

Thd/cbna Po Box 6497 Sioux Falls, SD 57117